

United States District Court
For the District of Delaware

Acknowledgement of Service Form
For Service By Return Receipt

Civil Action No. 04-209-SLR

FILED
CLERK U.S. DISTRICT COURT
DISTRICT OF DELAWARE
2005 JUN -9 AM 9:49

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Standard

Attached below is a return receipt card reflecting proof of service upon the named party on the date shown.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input checked="" type="checkbox"/> <u>Michael Albert</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Michael Albert</u></p> <p>C. Date of Delivery <u>JUN 7 2005</u></p>
<p>1. Article Addressed to:</p> <p><u>Ms. Dana Spring Monzo</u> <u>McCullough & McKenty, PA</u> <u>1225 W. King Street, Suite 1100</u> <u>P.O. Box 397</u> <u>Wilmington, DE 19899-0397</u></p>	<p>D. Is delivery address different from item B? If YES, enter delivery address below:</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p><u>7005 1820 0004 3169 6176</u></p>